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Bib Data Sheet

CONFIRMATION NO. 5021

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|-----------------------------|---------------------------------------|--------------|------------------------|------------------------------------|
| SERIAL NUMBER<br>10/813,364 | FILING DATE<br>03/31/2004<br><br>RULE | CLASS<br>431 | GROUP ART UNIT<br>3749 | ATTORNEY DOCKET NO.<br>059691-0114 |
|-----------------------------|---------------------------------------|--------------|------------------------|------------------------------------|

## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/509,939 10/10/2003  
 and claims benefit of 60/531,969 12/24/2003

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 06/21/2004

|  |                           |                         |                       |                            |
|--|---------------------------|-------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no                            | STATE OR<br>COUNTRY<br>OH | SHEETS<br>DRAWING<br>15 | TOTAL<br>CLAIMS<br>35 | INDEPENDENT<br>CLAIMS<br>5 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no Met after Allowance |                           |                         |                       |                            |
| Verified and Acknowledged<br>Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>                            |                           |                         |                       |                            |

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## TITLE

Filled/containerized candle lid and burn control device

|                                    |   |  |
|------------------------------------|---|--|
| FILING FEE<br><br>RECEIVED<br>1212 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____ |
|------------------------------------|---|--|